

ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY (VERIFICATION)

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER		41JD079325460		
	1	BESTERN ELECTRIC COMPANY, POST OFFICE BOX 35	INCO	RPORATED
		UNION	EJ	07083
INSTALLATION ADDRESS		650 LIBERTY AVERUE	E3	07083
EPA Form 8700-12B (4-80)	L	11/07/80	1	

NOTIFICATION OF HAZARDOUS WA	STE ACTIVITY INSTRUCTIONS: If you received a preprinted
INSTALLA- TION'S EPA	label, affix it in the space at left. If any of the information on the label is incorrect, draw a line through it and supply the correct information
I.D. NO.	in the appropriate section below. If the label is complete and correct, leave Items I, II, and III
INSTALLA-	below blank. If you did not receive a preprinted label, complete all items. "Installation" means a
II. TION ADDRESS PLACE LABEL IN THI	single site where hazardous waste is generated, treated, stored and/or disposed of, or a trans-
III. OF INSTAL- LATION	porter's principal place of business. Please refer to the INSTRUCTIONS FOR FILING NOTIFI-CATION before completing this form. The information requested herein is required by law (Section 3010 of the Resource Conservation and Recovery Act).
FOR OFFICIAL USE ONLY	
COMMENTS	
INSTALLATION'S EPA I.D. NUMBER APPROVED OF THE PROPERTY OF THE	ECEIVED & day)
FNJD07932546071 8010	C-ZY
I. NAME OF INSTALLATION	
W E S T E R N E L E C T R I C C O M P A N	Y I N C O R P O R A T E D
II. INSTALLATION MAILING ADDRESS	
STREET OR P.O. BOX	
3 P O S T O F F I C E B O X 3 5	45
CITY OR TOWN	N J 0 7 0 8 3
15 16 III. LOCATION OF INSTALLATION	40 41 42 47 - 51
STREET OR ROUTE NUMBER	
5 6 5 0 L I B E R T Y A V E N U E	
CITY OR TOWN	ST. ZIP CODE
6 U N I O N	N J 0 7 0 8 3
IV. INSTALLATION CONTACT NAME AND TITLE (last, first, & job title)	PHONE NO. (area code & no.)
2 MARX GEORGE DEPARTMEN	
V. OWNERSHIP	65 46 - 48 49 - 51 52 - 55
A. NAME OF INSTALLATION'S	LEGAL OWNER
8 A M E R I C A N T E L E P H O N E A N D	TELEGRAPH COMPANY
(enter the appropriate letter into box) VI. TYPE OF HAZARDOUS W	ASTE ACTIVITY (enter "X" in the appropriate box(es)) B. TRANSPORTATION (complete item VII)
F = FEDERAL W	56
VII. MODE OF TRANSPORTATION (transporters only – enter "X	THE CONTRACTOR PORT TO A STATE OF THE PROPERTY
THE RESIDENCE OF THE PROPERTY	TERE. OTHER (specify):
VIII. FIRST OR SUBSEQUENT NOTIFICATION	
Mark "X" in the appropriate box to indicate whether this is your installation's If this is not your first notification, enter your Installation's EPA I.D. Number	s first notification of hazardous waste activity or a subsequent notification. r in the space provided below.
	C. INSTALLATION'S EPA I.D. NO.
A. FIRST NOTIFICATION B. SUBSEQUENT NOTIF	ICATION (complete item C)
IX. DESCRIPTION OF HAZARDOUS WASTES Please go to the reverse of this form and provide the requested information.	

IX. DESCRIPTION O	F HAZARDOUS WASTE	S (continued from f	ront)		
A. HAZARDOUS WAST waste from non-spec	ES FROM NON—SPECIFIC Sific sources your installation h	SOURCES. Enter the finandles. Use additional	our—digit number fro I sheets if necessary.	m 40 CFR Part 261.31 for	each listed hazardous
1	2	3	4	5	6
F 0 1 7					
7	23 - 26	9	10	11	12
23 - 26	ES FROM SPECIFIC SOURCE	Z3 - 26	23 - 26	23 - 26 ED Part 761 22 for each l	etad bazardous waste from
	rces your installation handles.			FR Fart 201,32 for each i	sted Hazardous waste Holli
13	14	1.5	16	17	18
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
19	20	21	22	23	24
THE PARTY OF THE P					13.4
23 - 26	23 - 26	23 - 26	28	23 - 26	30
23 - 26	23' - 26	23 - 26	23 - 26	23 - 26	2 for each abornical sub
stance your installation	MICAL PRODUCT HAZARD in handles which may be a har	zardous waste. Use add	ditional sheets if neces	sary.	3 for each chemical sub-
31	32	33	34	35	36
23 - 26	38	39	40	23 - 26	23 - 26 42
					(第) [[[] [] [] [] [] []
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
43	44	45	46	47	111
23 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
D. LISTED INFECTIOU hospitals, medical and	S WASTES. Enter the four— I research laboratories your in	digit number from 40 stallation handles. Use	CFR Part 261.34 for e additional sheets if n	ach listed hazardous waste ecessary.	from hospitals, veterinary
49	50	51	52	53	54
		Mary 2 - Hatt	many - 1		
E CHARACTERISTICS	OF NON-LISTED HAZARI	DOLIS WASTES Mark	"X" in the boxes cor	responding to the characte	ristics of non-listed
hazardous wastes you	r installation handles. (See 40	O CFR Parts 261.21 -	261.24.)		
[] 1. IGNI	TABLE DO	2. CORROSIVE	□3. REA (D003)	CTIVE	4. TOXIC (D000)
X. CERTIFICATION	Profes Plenting	WHEN SAFEE			
attached documents I believe that the su	alty of law that I have po , and that based on my i bmitted information is tr ation, including the possib	nquiry of those ind ue, accurate, and c	ividuals immediate omplete. I am awai	ly responsible for obta	ining the information,
SIGNATURE	1 ^	NAME & OFF	ICIAL TITLE (type o	r print)	DATE SIGNED
OXX	routh	R. E.	HUGHES, Manag	er	10-20-80
EPA Form 8700-12 (6-8	D) REVERSE		10001	NEW TORK, N.T	

ENVIRONMENT SECTION
ACCHES
ACCHESTION

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ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

02/19/96

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Identification Number for that installation appears in the box The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of

EPA I.D. NUMBER -> NJD079325460

FACILITY NAME -> LUCENT TECHNOLOGIES INC

MAILING ADDRESS -> 7979 TUFT AVE DENVER, CO 80237

INSTALLATION ADDRESS -> 650 LIBERTY AVE UNION, NJ 07083

EPA Form 8700-12AB (4-80)

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY **REGION II** 290 BROADWAY NEW YORK, NEW YORK 10007-1866

ATTN: AIR & WASTE MANAGEMENT DIVISION, 22ND FL. **HAZARDOUS & SOLID WASTE PROGRAMS BRANCH RCRA NOTIFICATIONS**

TO: STOW, RONALD **ENVIRON ENGR** LUCENT TECHNOLOGIES INC 7979 TUFT AVE DENVER, CO 80237

Mark I

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Please print or type with ELITE type (12 characters per inch) in the unshaded areas only

Please refer to the Instructions for Filling Notification before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).



Notification of Regulated Waste Activity

United States Environmental Protection Agency

Date Received (For Official Use Only)

U.S. EPA AGENCY RO II

A. First Notification X B. Subsequent Notification C. Installation E. Number C. Complete Nom. C.	L Insta	latio	n's E	PA II	D Nu	ımbe	er (M	ark '	X' in	the a	ppn	opria	te b	ox)		>												
II. Name of Installation (Include company and specific site name) I. II C R N T T R C H N O I O G I E S 2 I N C . III. Location of Installation (Physical actiress not P.O. Box or Route Number) Street 6 5 O L I B E R T Y A V E . Street (Continued) City or Town County Cose County Name 9 7 1 E R T P D E A IV. Installation Mailing Address (See Instructions) Street or P.O. Box 7 9 7 9 T U F T A V E N U B V. Installation Contact (Person to be contacted regarding wasts activities at site) Name (Last) 8 T O W Note This Note This Street or P.O. Box 1 N C . State Zip Code C O 8 0 2 3 7 — V. Installation Contact Address (See Instructions) Note This R O N A L D R O N A L D R O N A L D Note This V. Installation Contact Address (See Instructions) A. Contract Address (See Instructions) A. Name of Installation's Legal Owner L U C E N T T E C H N O L O G I E S J I N C . Street, P.O. Box, of Route Number M O R R I S T O W N State Typ Code N J O 7 9 6 0 — Phone Number (Area Code and Number) M O R R I S T O W N N State Typ Code N J O 7 9 6 0 — Change of Owner L U C E N T T E C H N O L O G I E S J I N C . Change of Owner M O R R I S T O W N N State Typ Code N J O 7 9 6 0 — Change of Owner State Zip Code N J O 7 9 6 0 — Change of Owner Both Carper Version Resident Code and Number)		A. Fir	at No	otific	atio	1	X	1						tion			Λ/	丁	C. In	stalla	rition	's E		Nu	mbe	1771	10/)
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City or Town	Street	or P.	0. Bo	X																								
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	Costasyllandor	ID - For Official Use Only
VIII. Type of Regulated Waste Activity (Ma	rk 'X' In the appropriate boxes: Refer to Inst	ructions)
A. Hazardous W	The second secon	B. Used Oil Recycling Activities
1. Generator (See Instructions) a. Greater than 1000kg/mo (2,200 lbs.) b. 100 to 1000 kg/mo (200-2,200 lbs.) c. Leas than 100 kg/mo (220 lbs) 2. Transporter (Indicate Mode in boxes 1-5 below) a. For own waste only b. For commercial purposes Mode of Transportation 1. Air 2. Rail 3. Highway 4. Water 5. Other - specify	□ 3. Treater, Storer, Disposer (at installation) Note: A permit is required for this activity; see instructions. 4. Hazardous Waste Fuel □ a. Generator Marketing to Burner □ b. Other Marketers □ c. Bollerand/or Industrial Furnace □ 1. Smelter Deferral □ 2. Small Quantity Exemption Indicate Type of Combustion Device(s) □ 1. Utility Boller □ 2. Industrial Boller □ 3. Industrial Furnace □ 5. Underground Injection Control	1. Used Oil Fuel Marketer a. Marketer Directs Shipment of Used Oil to Off-Specification Burner b. Marketer Who First Claims the Use Oil Meets the Specifications 2. Used Oil Burner - Indicate Type(s) of Combustion Device(s) a. Utility Boller b. Industrial Boller c. Industrial Furnace 3. Used Oil Transporter - Indicate Type(s) of Activity(les) a. Transporter b. Transfer Facility 4. Used Oil Processor/Re-refiner - Indicate Type(s) of Activity(les) a. Process b. Re-refine
IX. Description of Hazardous Wastes (Use	additional sheets if necessary)	
Lignitable 2 Corrosive 3 Reactive 4 To	n handles; See 40 CFR Parts 261.20 - 261.24) oxiolity haracteristic (List specific EPA hazardous waste nu	
B. Listed Hazardous Wastes. (See 40 CFR 2	261.31 - 33; See instructions if you need to lis	at more than 12 waste codes.)
7 8	9 10	5 6 11 12 12 12 12 12 12 12 12 12 12 12 12
C. Other Wastes. (State or other wastes requ	iiring a handler to have an I.D. number; See i	instructions.)
1 2	3 4	5 6
X. Certification	3	3/2
I certify under penalty of law that this document system designed to assure that qualified persons or persons who manage the system, or those pe best of my knowledge and belief, true, accurate, including the possibility of fine and imprisonment	net properly gather and evaluate the information rsons directly responsible for gathering the in and complete. I am aware that there are signific	n submitted. Based on my inquiry of the person formation, the information submitted is, to the
Signature Lal	Name and Official Title (Type or print Promila Lal Environment & Safety Consultations	2/5/96
	1714123 741	N9244
XI. Comments Change of Installation name	from AT&T Corp. to LUCENT TE	CHNOLOGIES, INC.



R. E. Hughes Manager, Regional Material Management, Distribution and Repair Services (New Jersey Bell)

650 Liberty Ave. Union, N. J. 07083 201 964-2000 Address Mail To: P.O. Box 374 Union, N. J. 07083

October 20, 1980

MR. HARRY RUISI
EPA Region II
Information Service Center
26 Federal Plaza
New York, New York 10007

Dear Mr. Ruisi:

Enclosed is a completed EPA Form 8700-12 for Western Electric Company in Union, New Jersey. At the present time, our facility falls under the small quantity generation exemption as defined in Section 261.5 of the May 19 hazardous waste regulations. We are filing notification, at this time, in the event a situation should arise where we are subject to the RCRA generation regulations in 40 CFR Part 262.

J. R. T. Huzkes 10/10/80

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Department of Environmental Protection Solid & Hazardous Waste Regulation Element Manifest Section P.O. Box 421 401 East State Street Trenton, New Jersey 08625-0421

"Request to Deactivate EPA ID Number"

EPA ID No. NJD 079 325460
Company Name: Lucent Technologies Inc
Site Address: 650 Liberty Avenue Union (street) (city / town) NJ 07083 (state) (zip code) (lot) (block)
Mailing Address: 600-700 Mountain Ave (lm 78513) Murray H.11 (street/P.O. box) (city/town) (state) (zip code)
Company Contact: William J Havel 908-582-7156 (name) (area code and phone number)
Reasons for deactivating EPA ID No. (Check all appropriate boxes.)
o The EPA ID number was obtained for a one time cleanup which is completed.
o The site has completed an ECRA cleanup (indicate ECRA Case #)
• Other Lease expired and uscated property on 9/30/03.
Is the site presently occupied? (circle ves or no)
Sign and date the application below, and retain the last page (pink copy) for your records. (printed name) (signature) Env. Program Mor (title) (date)
Submission of false information is a violation of N.J.A.C. 7:26-5.6 and N.J.A.C. 7:26-7.3

copies: NJDEP/DSHW Manifest section (address above)

Applicant is to keep a copy

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700 Mountain Avenue P.O. Box 636 Murray Hill, NJ 07974 908-582-2280

February 27, 2004

Department of Environmental Protection Solid & Hazardous Waste Regulation Element Manifest Section P.O. Box 421 401 E. State Street Trenton, NJ 08625-0421

Re: Request to Deactivate EPA ID Number EPA ID # NJD 079 325 460 Lucent Technologies Inc., 650 Liberty Avenue, Union, NJ 07083

Gentlemen:

Attached is a request to deactivate the EPA ID number NJD 079325460 for Lucent Technologies Inc. located at 650 Liberty Avenue, Union, NJ 07083. Lucent sold this property to Townsend Capital LLC and signed a lease to rent on 10/1/1998. The lease expired and Lucent vacated the property on 9/30/2003. Please deactivate the EPA ID number.

All return correspondence should be directed to:

William J. Havel Lucent Technologies Inc. 600 - 700 Mountain Avenue – Rm. 7B-513 Murray Hill, NJ 07974

If you have any questions, please contact me at 908-582-7156.

Yours truly,

William J. Havel

Environmental Program Manager,

Environmental, Health & Safety Center

1AR - 8 2004

North America Region

Environment, Health, and Safety Organization

475 South Street Room 2S078 Morristown, NJ 07962-1976 Phones: 1 (973) 606-2907 1 (888) 53-WASTE

Fax: 1(888) NAROEAST

Date:

October 9, 1997

To:

Jack Hoyt

EPA -- Region II 22nd Floor 290 Broadway

New York, NY 10007-1866

Re: Deactivation of EPA ID# NJD079325460

Kindly inactivate EPA ID Number NJD079325460 assigned to Lucent Technologies for the facility located at:

650 Liberty Avenue Union, NJ 07083

The hazardous waste generation activities associated with this facility have been completed. The building has been sold.

If you have any questions, please contact me at (973) 606-2907.

Sincerely,

Arlene McHugh

Hazardous Waste Coordinator

Milene Mc Hugh

copy to: E. Jenkins

J. Kazazis

L. Schubert

AGENCY RO II
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